

Page 1 redacted for the following reason:

foreign language, (b)(6)

VEHICLE DAMAGE CAUSING DEATH 12
 TODAY ON SATURDAY 29th SEP 2007
 THIS DRIVER (b)(6) WAS
 INVOLVED IN AN AUTO ACCIDENT WITH
 THE COALITION FORCES AT 1600 HRS.
 HIS VEHICLE IS AN AUDI GRAY IN
 COLOR. ONE OF OUR VEHICLES CRASHED
 WITH HIS CAR AND CAUSED IT TO TURN
 OVER AND GET DESTROYED AND
 KILLED THE DRIVER AND HIS
 BROTHER. THE DRIVER WAS
 NOT AT FAULT.
 (b)(3), (b)(6)
 (b)(3), b(6)

INT. INTERNATIONAL
 DIVISION - BAGHDAD

IRAQI CLAIM CARD
 AUDI CAR

The Army may pay claims to Iraqi civilians for property damage, injury and death caused by the Coalition Forces.

1. Fill out the required information below.
2. Give this card to the Iraqi civilian, or other claimant, person in the case of death.
3. Direct claimant to the nearest Government Liaison Center or the Iraqi Assistance Center. Do not pay them anything.
4. Upon return to your FOB, complete a SF 81 or DA 2622. Describe the incident completely and forward your nearest legal office. NOTE: This information is an admission of liability by the soldiers involved and will be used only to substantiate a claim against the U.S. Army.

UNIT ATRP 1-14 CAU
 DATE 29 Sep 07
 LOCATION Holland APTS
 TYPE OF INCIDENT Accident Hum
VEHICLE DAMAGE 12



CENTCOM 003065

Pages 4 through 5 redacted for the following reasons:

Foreign Language Text, (b)(6)
foreign language, (b)(6)

اشرح بالتفصيل متى تضرر والكلفة للممتلكات أو للإصابات الجسدية وتكلفتها (الرجاء إضافة الشبونات والممتلكات والفواتير الضرورية لكل شيء لوحدته)

تكاليفه

الشيء المتضرر

\$ 15,000
\$ 16,000
\$ 5,250

Foreign Language Text

اجمالي التكلفة: \$ 36,250

I was insured to the following extent against the damage or injury I have sustained:

N/A

لدي تأمين على الممتلكات أو الضرر الجسدي المتضرر بما يوازي:

15

The name and address of my insurer (if any) is:

(Name)

N/A

(Address)

إذا كان لديك أي تأمين الرجاء ذكر أسم وعنوان شركة التأمين:

Foreign Language Text

(العنوان)

(الأسم)

I claim as damages: (Indicate amount in U.S. dollars and local currency)

\$ 35,250 Local 42,300,000 ID

اطالب بتعويض للأضرار يوازي (اكتب بالدولار الأمريكي أو العملة المحلية)

Foreign Language Text

العملة المحلية

Foreign Language Text

\$

CENTCOM 003068

27747

I (have/ have not) previously filed a claim relating to the incident described above.

سابقاً (قمت) (لم أقدم) بتقديم بلاغ لهذه الحادثة المذكورة بالأعلى

To the best of my knowledge, another claim (has/ has not) been filed relating to the incident described above.

لحسن علمي طلبت تظلم (قدم) (لم يقدم) لهذه الحادثة المذكورة بالأعلى

NOTE: BY SIGNING BELOW, YOU ARE SWEARING THAT THE INFORMATION PROVIDED IN THIS CLAIM IS ACCURATE AND TRUTHFUL. ANYONE WHO ATTEMPTS TO FILE, OR CONSPIRES TO FILE, A DUPLICATE OR FRAUDULENT CLAIM AGAINST THE UNITED STATES GOVERNMENT WILL FACE CRIMINAL PROSECUTION.

ملاحظة: بالتوقيع أسفل هذا التظلم فإن تقسم على أن كل المعلومات المقدمة في هذا التظلم هي صحيحة وحقيقية. أي شخص يحاول تقديم تظلم كاذب أو مختلق أو يزور التظلم ضد حكومة الولايات المتحدة الأمريكية سوف يواجه عقوبات جنائية حادة ويحاكم من قبل السلطات.

Foreign Language Text, (b)(6)

(SIGNATURE OF CLAIMANT)

(توقيع التظلم) للرجاء كتابة الاسم والتوقيع

Subscribed to me this 17th day of June, 2008.

Foreign Language Text, (b)(6)

(Signature of Witness)

(b)(6)

(PRINTED NAME)

Foreign Language Text

في عام

Foreign Language Text

الموافق

Language

عُينت في يوم

Foreign Language Text, (b)(6)

(توقيع الشاهد)

Foreign Language Text,

(اسم الشاهد بالكامل)

CENTCOM 003069

A brief statement of the incident

According to the claimant (b)(6)
That while her sons ((b)(6)) were driving their car type Audi model 1993 color gray, at 4:00 am, and near the bridge of Medicine city- Bridge of 17th July, an American patrol contained about three hummers came from the back side of the claimant's car and the first hummer had struck the car from back & left side, and that led to death her sons immediately, and when his relatives went to the Al- Karkh hospital Republic they found the Iraqi Claim Card on the bodies of the two victims. Then they sent her to Iraqi police station and NIAC for the purpose of compensation.

CENTCOM 003070

Give a brief statement of the accident or incident on which the claim for damages to property or for personal injury is based, (Use back of this sheet if necessary.)

بإختصار أشرح ما حدث والأضرار التي أصابك جراء ذلك ، سواء كانت جسمية أو ممتلكات . (الرجاء استعمال خلفية هذه الورقة إن لم تكن الأسطر لتكفي)

Describe nature and extent of property damage or personal injury sustained as a result of the above incident.

أشرح متى وطبيعة ما حدث من أضرار سواء كانت جسمية أو لممتلكاتك والتي أصابك جراء ما حدث بسبب الحادث المقصود .

List in detail the amount of property damage and itemized expenses resulting from the property damage or personal injury; (Attach bills and receipts, if applicable.)

Item	Amount
for killing her son;	(b)(6) \$15,000
for killing her son;	\$15,000
The price of car;	\$5,250
for the price difference before and after the car incident.	Total: \$35,250
\$6,500 before	
\$1,250 after	
<u>\$5,250</u>	

The statement
of witness:

Foreign Language Text

Foreign Language Text

CENTCOM 003072

27751

Statement of witness

Foreign Language Text, (b)(6)

CENTCOM 003073

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foreign language, (b)(6)

**Al-Gaifar Police Station:
Oct 14 2007**

Mr. Investigating Judge of Al-karkh investigation court-Esq.

Your decision noted on Oct 3 2007:

1. We bring before your honor the claimant of personal right
(b)(3), b(6) the mother of the two victims for
the purpose of certifying judicially her statements and to
document the witness's statements.
2. We attached the Minutes of Examination and Sketch of the
Incident place.
3. We want to inform you that the car belonging to the victim,
(b)(3), b(6) is now in our police station.
4. We attached the MORGUE certificate of the two victims
(b)(3), b(6)
5. We attached the letter of Human Rights organization.

The officer:

1. The statements of the claimant of the personal right
(b)(3), b(6) had been noted and we
certify judicially his statement, also the witnesses'
statements had been noted.
2. Giving the car to the rightful owner (victim's mother).
3. Giving a copy of investigation's papers to victim's
mother for the purpose of compensation.
4. To informed the public prosecutor.

Oct 14 2007

CENTCOM 003075

**Al-Gaifar Police Station:
Sep 29 2007**

Open police report:

Mr. (b)(3), b(6) (claimant's relatives) attended to our office and informed us about car incident which struck by U.S forces and that led to death the two person which was inside the car immediately, for that we opened the file and the investigation had been started.

The same statements of the claimant.....

Sep 29 2007

CENTCOM 003076

Page 15 redacted for the following reason:

(b)(6), Foreign Language Text

Al-Gaifar Police Station:
Oct 14 2007

Mr. Investigating Judge of Al-karkh investigation court-Esq.

The statements of the claimant of the personal right (b)(6)
(b)(6) the mother of the two victims (b)(6)
(b)(6) , she is born in (b)(6) lived in.....

The claimant's statement.....

Oct 14 2007

CENTCOM 003078

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foreign language, (b)(6)

Claim Form

طلب تعظم

To: United States Army Foreign Claims' Commission

الى : مفوضية التعاضد اجتهت . الامم المتحدة الامم المتحدة

From: Name_

(b)(6)

من : الاسم

Address: Baghdad - Al-Karrada

العنوان:

(b)(6)

Telephone _____

الهاتف:

I am

a. National citizen of

Iraqi

انا
احمل الجنسية

b. Permanent address

Baghdad - Iraq

ب. عنواني الدائم

c. Employed by _____

(b)(6)

ت. اعمل لدى

d. Check one () an insurer (X) not an insurer

ت. ضع علامة على احدهم () احمل التأمين () لا احمل التأمين

e. Check one () a subrogate (X) not subrogate

ج. ضع علامة على احدهم () اذ ان او () ليس دان

CENTCOM 003080

I hereby make a claim against the United States Government for damages or injuries caused by: (Name, Organization, Military Department, Address, and Telephone Number)

ATR P 1-14 CAV
20 SEP 07

أني أتظلم لدي حكومي الولايات المتحدة للأضرار والإصابات التي نجمت من:

الاسم
المنظمة
الوحدة العسكرية
العنوان
رقم التليفون

The property damaged is owned by: (If the claim is made as an agent, parent, or guardian, attach a power of attorney or other evidence of authority and fill in the form below for party sustaining the damage or injuries.)

The claimant himself.

الممتلكات المتضررة مملوكة من: (إذا كان هذا التظلم قدم من قبل ممثل أو قريب أو عائل فالرجاء أخطار المستمسكات التي تخولكم وتوكلكم للتقدم بهذا التظلم ، أو أي دليل من ممثلين رسميين. إملأ التظلم بالأسفل للأفراد المتقدمين بالشكوى للإصابات أو الأضرار التي أصابتهم.)

المتضرر نفسه

My claim arose at: near the bridge of medicine city - Haifa street. Baghdad Iraq.
(Town) (City) (Country)

Foreign Language Text

تظلمي قدم في: القرية المدينة البلاد أو المحافظة

My claim arose on: Sep 29 2007
Month Day Year

Foreign Language Text

تظلمي قدم في: شهر يوم السنة

CENTCOM 003081

Pages 20 through 21 redacted for the following reasons:

foreign language, (b)(6)

Republic of Iraq.

Ministry of Health
Section of Health & Biological
Statistic.

№ 0096524

Date of Billing:

Foreign Language Text

Foreign Language Text

Foreign Language Text

Feb 5 2004

Confirming of Death Certificate
of claimant's husband -
(victim's father).

(b)(6)

Foreign Language Text

Place of Birth:

Religion:
Moslem

(b)(6)

Sex: male

The name of deceased:

Foreign Language Text

Foreign Language Text, (b)(6)

Iraqi

Foreign Language Text

Foreign Language Text

reason of death:

Foreign Language Text

Deficit in the
heart.

Foreign Language Text

Foreign Language Text

Foreign Language Text

CENTCOM 003084

Date at
Gilling's
Sep 30 2007

Place of
Death:
Haifa Street
the main road

caused
from of
resulting from: 5/11/11

Foreign Language Text

Foreign Language Text

Foreign Language Text

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Foreign Language Text, (b)(6)

Foreign Language Text

Date of Birth: 1983

Sex: male

angu, angu

Langua

Langua

Foreign Language Text

(b)(6)

Foreign Language Text, (b)(6)

Death Certificate

Republic of Iraq
Ministry of Health &
Biological Statistics

CENTCOM 003085

Date of killing:

Sep 30 2007

Place of

Death:

Haira street

the main road

Caused from

or resulting from: strike by u.s forces

Foreign Language Text

Foreign Language Text

Foreign Language Text

Language

Language T

Nationality: Iraqi

SEX: MALE

Foreign Language Text

Foreign Language Text, (b)(6)

Language

Language

Foreign Language Text

Foreign Language Text

Language

Foreign Language Text

Language

Foreign Language Text

Section of death & Biological Statistics

Ministry of Health

M 003086